

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

ORIGINAL NO. **10/089013**
FILING DATE

		AD FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		CLAIMS					
		IND.	DEP.	IND.	DEP.	IND.	DEP.	1		2		3	
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